

# Chittenden County Homeless Alliance (CCHA)

Coordinated Entry Meeting, 8:30 AM April 22, 2020

Online meeting

ATTENDEES:

# DRAFT

- Robyn Stattel, **ESD**
- Chelsea Alsofrom, **Pathways**
- Thomas Moore, **UVMHC**
- Jason Brill, **VA**
- Lacey Smith, **BPD**
- Emily Taylor, **CVOEO**
- Stephen Lunna, **SSVF@UVM**
- Elizabeth Kanard, **CHCB**
- Meghan Morrow Raftery, **ICA**
- Nicole Kubon, **STEPS**
- Will Towne, **Spectrum**
- Margaret Bozik, **CHT**
- Louise Masterson, **ICA**
- Linda Amante, **CVOEO**
- Stephanie Smith, **STEPS**
- Sophia Senning, **COTS**
- Elaine Soto, **Howard**
- Chris Brzovic, **CVOEO**
- Stephen Marshall, **Lived Experience**

## PRELIMINARIES

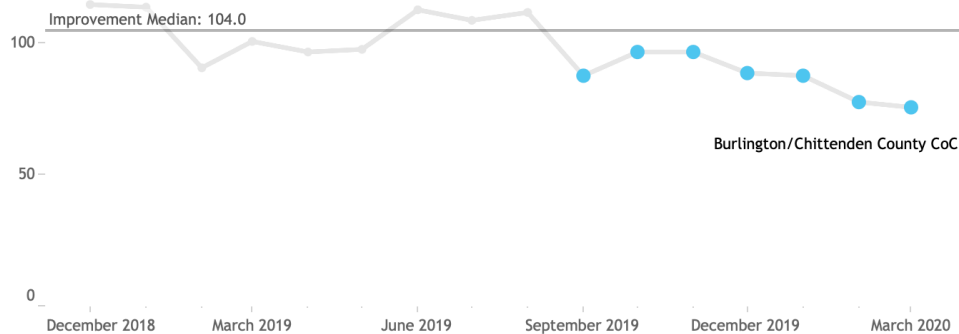
- Robyn Stattel from ESD introduced herself.
- Sophia Senning of COTS also introduced herself.
- Linda Amante/ CVOEO: Is there a way to identify how many people who are in motels right now have come from outside Chittenden?
  - Robyn Stattel: Not something we typically capture. We don't know.
- Margaret Bozik/ CHT: We now have about 1500 people in motels statewide, is that correct?
  - Robyn Stattel: Yes. St. Albans motel capacity has been an issue.
  - Margaret Bozik: So 400 sounds like Chittenden's relatively normal load.
- Linda Amante/ CVOEO: COTS has about 26 - 30 people in motels and we have approximately the same (about 20 - 30). These are known active case-management clients.
- Nicole Kubon/ STEPS: We have probably about as many as well.

# MONTHLY DATA REVIEW by Chris Brzovic

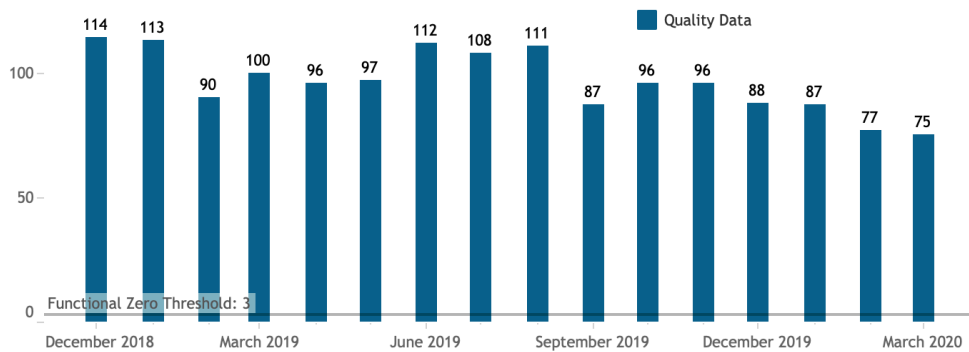
BFZ data to March 2020 — before the Covid crisis hit:



## Actively Homeless Monthly Chronic data with signal indicators for Shifts

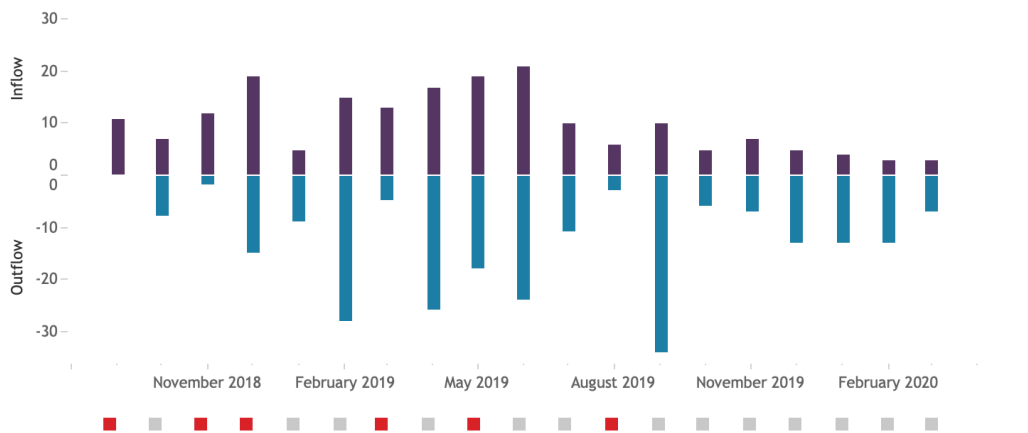


## Actively Homeless Population Monthly count for Chronic subpopulation(s)

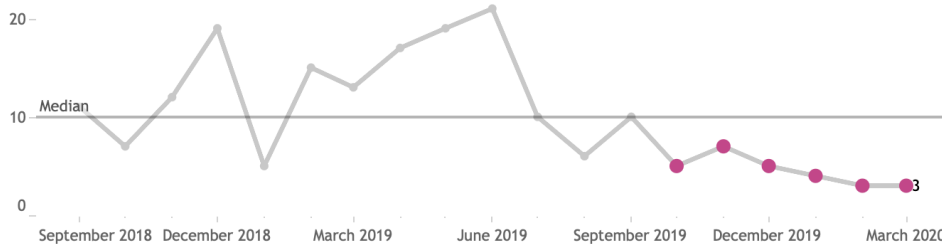


- Chris Brzovic/ CVOEO: We’re seeing a real shift downward but we’re also continuing to see a core of chronically homeless. Movement into PSH is so slow that we’re coming up against a wall. These are people who have high need but they’re stuck because we don’t have access to enough resources. We also need more 1 bedroom units.
  - INFLOW is down (see below):

Monthly Inflow & Outflow Red square at bottom indicates Inflow exceeded Outflow



Inflow Total Use drop-down at right to adjust metric displayed



All of this data is available here (be sure to choose ALL DATA, rather than “Quality Data”): <http://www.chavt.org/2019/08/05/built-for-zero/>

- We’re very close to ending Veteran homelessness in Chittenden County.
- We’re seeing fairly low numbers for families as well.

### Discussion of Verbal Consent

- Chris Brzovic: We do need to obtain written consent as soon as humanly possible afterward the emergency is over.
- Nicole Kubon/ STEPS: Let’s make the verbal consent length shorter than 12 months.
- Margaret Bozik/ CHT: What about the end of the declared emergency?
- Jason Brill/ VA: Let’s add 60 days beyond declared emergency.
- Will Towne/ Spectrum: How about 90 days? This way they would move to inactive anyway.

- Stephen Marshall: It should be 90 days from the date of a public announcement from the state that people are allowed to gather in small groups.
- So we'll go with 90 days after the end of the emergency (no vote required).
- **Newest version of the Informed Consent Form Version 4.1.** <http://www.cchavt.org/wp-content/uploads/2020/05/2020-04-22-CCHA-CE-Client-Release-Form-Ver-4.1-verbal-consent.pdf>
- **Obtaining Verbal Consent Guidelines:**

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## **Proposal to change housing prioritization during the Covid crisis led by Chris Brzovic**

- This allows us to account for medical vulnerabilities and age-related vulnerabilities in ways that give them more weight than previously, because of Covid.
- This wouldn't replace the current prioritization but just be an additional consideration that would come through case conferencing at CHRC. It would be done as a group and documented. Examples of prioritization changes/additions:
  - Age (62 plus)
  - Status as immunocompromised
  - Existence of chronic health conditions
  - Current sleeping location
  - Based on high risk conditions outlined by the CDC
- There is also limited ability to take in new referrals right now. Liz Whitmore at BHA said things are relatively frozen for them. They are reviewing referrals on a case by case basis looking for people who are especially vulnerable.
- Meghan Morrow Raftery/ ICA: Will this be added to the score or do you need things pulled from HMIS? Also, is this self-report or diagnosed?
  - Chris Brzovic: Nothing pulled from HMIS. We might be coordinating with Adult LIT (with permissions/ releases) and case managers. HUD asked everyone to be nimble and not get bogged down in process. So this would not be an additional assessment process. We just want to make clear that we are prioritizing for these specific reasons.
- Will Towne/ Spectrum: Let's try to keep our policies consistent across our entire system.
- Chris Brzovic: I'm concerned about making the prioritization too broad. We need to be able to look at this on a case by case basis.

- Jason Brill/VA: How do we match this with the ESD Hyper-vulnerable category. Here is their memo: <https://helpingtohousevt.org/wp-content/uploads/2020/03/hyper-vulnerable-memo.pdf>. In particular, the age range differs from yours.
- Stephen Marshall: This worries me as it seems like a slippery slope to exception making. On the other hand, these are important considerations for any time, not just now.
- Stephanie Smith/ CVOEO: The 62 age group was chosen just because that's how people are categorized in HMIS. It just says 62+ . Let's add the phrase "not well controlled" to "underlying health conditions" per the CDC website. It speaks to someone being particularly vulnerable in a particular case.
- Jason Brill: Including the consideration for where they're sleeping seems important as well.
- Chris Brzovic; The only thing we need from HMIS is to parse people out by age. Exact age would be easiest for us.
- We'll bring these changes to the Steering Committee in a couple weeks.

## **Emergency motels during COVID-19 and Coordinated Entry – next steps**

- Chris Brzovic: Mark Eli from ESD has reached out and wants to do some work on who's already connected with Coordinated Entry and who's not. (ESD came into HMIS data sharing in version 4 of the ROI so we can't share all of the names, but we can share those who have signed the ROI).
- Nicole Kubon: Can we just get a motel list from ESD and compare to the master list?
- Robyn Stattel: We can't turn over a list of 400 people to a large group. It's the release issue. We've started distributing letters at the motels to try to encourage people to get in touch with us.
- Nicole Kubon: Steps will have to coordinate directly. Our folks are de-identified on the master-list so if Coordinated Entry sends a list to ESD, it won't include DV people. My understanding is that DV people are being housed under several categories, including; catastrophic, hyper-vulnerable, and adverse weather when it applies. We'll troubleshoot directly.
- Robyn Stattel: If people shared with us that they are working with Steps, we will have those names. It will only be those who haven't.

- Margaret Bozik: This regards advocacy we've been doing with the legislature. There are simply no vacancies right now — no one is moving out. Hopefully, we'll get a rental assistance package passed that will alleviate a mass wave of people losing their housing when the rental moratorium is lifted. Setting that aside, and looking for opportunities, we've been exploring the possibilities of creating 100 - 200 units of new housing. So one question we have is about the cost of service supports for people. Could we get your feedback on this: 30 - 35 people per caseworker. Is that a reasonable ratio?
    - Stephanie Smith: For general population, yes. But for people who need intensive support, 15 would be the limit.
    - Margaret Bozik: This is general population.
    - Robyn Stattel: I think the new population coming into the system (a group we don't know much about right now) might very well be split between high need and general population.
  - Chris Brzovic: There is probably going to be a huge spike in our literally homeless numbers. There's a population of "couch surfers" for example who are staying in motels now and will be considered literally homeless.
  - Nicole Kubon: There are also going to be a lot of people now who we just don't have the capacity to serve.
  - Stephen Marshall: This seems like a great opportunity to get a more accurate count of those who are homeless.
    - Robyn Stattel: I agree. I think the numbers we're seeing are a much more accurate look at homelessness. We always knew PIT was not capturing everyone. Now we can try to identify who was not previously known to us.
  - Chris Brzovic; Next step is cross-referencing the lists.
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**Please go to [cchavt.org](http://cchavt.org) for a minutes archives and upcoming meeting dates.**

**Next Meeting: May 27**